

EXHIBIT 6

DECLARATION OF LAURA G. RIVERA, ESQ.

I, Laura Rivera, Esq., hereby declare under the penalty of perjury pursuant to 28 U.S.C. § 1746:

1. I make this declaration based on my personal knowledge except where I have indicated otherwise. If called as a witness, I could and would testify competently and truthfully to these matters.
2. I am the Director of the Southeast Immigrant Freedom Initiative of the Southern Poverty Law Center (“SIFI”). SIFI represents people confined inside three Georgia detention centers: the Irwin County Detention Center (“Irwin”) in Ocilla, Georgia; the Folkston ICE Processing Center (“Folkston”) in Folkston, Georgia; and the Stewart Detention Center (“Stewart”) in Lumpkin, Georgia. Collectively, these detention centers may confine up to 4,000 people at any given time.
3. SIFI focuses on winning clients’ release from ICE custody. Nearly 100 percent of our clients are in detention. Most of SIFI’s advocacy occurs before the Executive Office for Immigration Review and U.S. Immigration and Customs and Enforcement (“ICE”). We have four teams in Georgia, one each at Irwin, Folkston, and Stewart, and a headquarters in Decatur with staff that operates a hotline and manages program operations.

4. SIFI has represented hundreds of people confined inside of Irwin, Folkston, and Stewart since it launched in April 2017. We have many clients inside all three of these detention centers right now, and many more who are contacting us to ask for our help. Even since the outbreak of the COVID-19 pandemic, our staff continue to make in-person visits regularly and to speak with clients and potential clients by video teleconference (“VTC”) or phone. What we are witnessing first-hand and learning in conversations with detained individuals reveals a grossly deficient response by government officials and private contractors to stem the spread of the virus.

Irwin Detention Center, Ocilla, Georgia

5. Irwin has a capacity to confine up to 780 people at any given time. It is operated by private prison contractor LaSalle Corrections. It confines men and women under the custody of ICE, the U.S. Marshals Service, and Irwin County.

6. About two years ago, I conducted a stakeholder tour of Irwin. ICE agents and LaSalle Corrections staff walked a small group of us through parts of the facility, including a medical wing. They allowed us to view from the outside two housing units and the dining hall. The observations I make here come from notes I made at the time.

7. Irwin has several housing units. I know of four in particular: Echo, Fox, Alpha, and Charlie. Echo and Fox are newer towers with cell-block-style pods. Each pod has cells that hold between two and four people. I saw the Echo and Fox units from a Panopticon-style observation room. Officials told us that Alpha and Charlie are older and are “open dorm” style. They said each had six dorm areas, and that each dorm area could hold up to about 100 people. I requested to see the Alpha and Charlie units, because many women had complained of unsanitary conditions there, but the officials refused to show them to us.

8. Officials told us Irwin has two medical wings, segregated by sex. We went inside one of the medical wings. The male medical unit contains two cells for medical housing; the female side has three medical housing cells. We also saw the outside of one of Irwin’s two “special housing units,” cell-block-style units where people could be confined for disciplinary reasons, medical reasons, or for protective custody. The warden told us each could hold up to 100 people.

9. For years, advocates have published findings from investigations documenting medical neglect and deficient hygiene and sanitation protocols at Irwin.¹ Those reports show a pattern of detained individuals waiting weeks to be

¹ Azadeh Shahshahani and Priyanka Bhatt, Report to U.S. Commission Civil Rights (May 13, 2019), available at: <https://projectsouth.org/wp-content/uploads/2019/05/Comment-to-U.S.-Commision-on-Civil-Rights-Georgia-Detention-Centers.pdf>; Laura Rivera, “No End in Sight,”

seen by a facility health care provider, insufficient supply of soap, and the issuance of used undergarments. In my prior role as Advocacy Attorney for SIFI, I represented several people who suffered medical neglect at Irwin. One client had complications after a miscarriage and suffered severe pain for months—and lasting injuries—due to her custodians’ failure to provide her with adequate health care. Another was held in solitary confinement for months in retribution for questioning the inadequate mental health care he was receiving there.

10. Reports SIFI staff have received from people inside Irwin in recent weeks mirrors the past pattern, even as concerns mount that COVID-19 is spreading among people confined there. This week, an Irwin-based SIFI attorney received two letters from women inside detailing conditions that directly undermine ICE’s representations that the agency is applying appropriate public health protocols inside its facilities. One writer described being confined inside of a unit with 50 bunkbeds squeezed two to three feet from one another. Their blankets are washed once a month. They are given two rolls of toilet paper per week. Each week, they get three bars of soap, about 3 inches by 2 inches. The underwear they are issued is used. The showers are moldy and they do not get adequate cleaning solvents despite requesting them. Guards enter the unit without masks. At mealtime, they

(Oct. 3, 2018), available at: <https://www.splcenter.org/20181003/no-end-sight>; Eunice Cho and Paromita Shah. “Shadow Prisons” (Nov. 2016), available at: bit.ly/2GtLWcT.

are not using disposable cups. There are people with fever and cough who have requested sick call, only to wait three to four days. When some of the women raised concerns with facility officials, they were threatened with “lockdown.”

11. The other writer reported similar conditions. She expressed concern with guards entering and exiting the facility, potentially exposing detained people like her to the coronavirus. She reported that the guards do not wear masks or gloves. Women who are detained with her who have asthma have not gotten inhalers. The shower curtains have larvae growing on them.

12. Several people inside Irwin who have contacted our hotline over the past two weeks report not getting information about coronavirus or how to prevent its spread. In four calls logged on March 19 and 26, all four callers denied having gotten any information about coronavirus from ICE or guards. One caller had heard rumors about a person at Irwin having contracted the virus. Another stated “we are sitting ducks.” Another stated that he had high blood pressure but had stopped getting medication for it at Irwin. Another said at least one person inside his housing unit was coughing, and the cough was worsening, but that person had not been removed from his housing unit at the time of the call.

13. Separately, a detained individual who works in the kitchen reported there were confirmed cases of COVID-19 inside the facility and that it was under

quarantine. In terms of precautions, the only one he reported was that he and other kitchen workers have been instructed to replace plastic ware with paper plates. The man, who suffers from diabetes and high blood pressure, expressed concern that he would be at higher risk of contracting the virus and experiencing respiratory complications. He asked SIFI for help getting out to avoid getting infected.

Folkston ICE Processing Center, Folkston, Georgia

14. Folkston, a detention center operated by GEO Group, may confine more than 1,100 people for ICE at any given time. Over the past two weeks, seven callers have reported limited access to hygiene products or information about the coronavirus. Only one, a man with a history of stroke, said he had received any information, and that was to maintain cleanliness. However, he said the only soap he has is for showering.

15. Another caller reported delays in receiving medical attention, including waits of five to six days to see medical staff after initiating a request. At least one person inside of his housing unit had symptoms like coughing, fever, or shortness of breath; this person had not been removed from the caller's housing unit as of the time of his call. Another caller reported flu-like symptoms and had been waiting for more than a day since he requested a medical appointment. Another caller stated he felt sick due to the lack of ventilation inside the detention center. He

reported being aware of the coronavirus outbreak, and expressed fear of contracting the virus because he thought the detention center most likely would not provide proper medical treatment.

16. The increased demand on medical services that is sure to come inside Folkston will strain their limited resources. For example, a Folkston-based SIFI staff member reported having witnessed ICE having to procure medical equipment locally. The staff member observed an ICE agent walk into the Folkston lobby from the parking lot and deliver a box with a thermometer to the front entry staff. The ICE officer said he had driven to several different drugstores to find thermometers because they were sold out.

Stewart Detention Center, Lumpkin, Georgia

17. Stewart, a detention center operated by private prison company CoreCivic, is one of the biggest ICE facilities in the country, having a capacity to confine some 2,000 people at a given time. Just as I did at Irwin, about two years ago, I conducted a stakeholder tour of Stewart. I saw the spaces they used to process new arrivals, or “intake.” They used two spaces: a large open space with garments and a computer station, and a hallway with a couple of cells where some people are held, including those who request medical attention. I saw one holding cell in use near entrance to intake and it was overcrowded. I specifically noted that the time that it

concerned me to think about how this protocol could exacerbate potential infectious disease spread.

18. To request medical assistance, detainees must be awake around 4 a.m., when guards go past each pod in each unit and call out for detainees feeling sick. In 2018, there was no way to request medical attention in writing. Detainees who respond are then brought to the intake area to be seen by a licensed practical nurse or registered nurse. If the detainee needs additional medical attention, they are taken to the medical unit and must wait in a waiting room there. Upon entering the medical unit on my tour, a man in the waiting room said to us, “nos están tratando mal,” or, *they’re mistreating us*. Past the waiting room was a hallway with three rooms for patient consultations. At the time of our visit, the medical unit was under construction; we were told that they were building more consultation rooms.

19. Published reports have documented chronic shortages in Stewart’s medical staff.² Notes from an investigation by the U.S. Department of Homeland Security’s Office of the Inspector General reflect that in an interview with the facility’s chief medical officer, the Health Service Administrator, he reported chronic shortages of almost all medical staff positions. He also reported an extreme shortage of

² Elly Yu, “Exclusive: An ICE Detention Center’s Struggle With ‘Chronic’ Staff Shortages,” (May 31, 2018), available at: <https://www.wabe.org/exclusive-an-ice-detention-centers-struggle-with-chronic-staff-shortages/>.

ambulance services such a rural setting, and that if there is a serious medical emergency, only a few community resources are available. I reviewed those notes. Though the investigation dates back to 2016, I have every reason to believe that Stewart continues to be plagued by understaffing.

20. Over the past two weeks, Lumpkin-based SIFI staff who have made in-person visits to Stewart report spotty use by staff of personal protective equipment. Some but not all CoreCivic staff wore gloves; no staff wore masks. The volume of staff traffic in and out of the facility continued without noticeable change. One SIFI staff member asked CoreCivic personnel whether staff considered vulnerable could stay home, and was told they knew nothing about that.

21. Reports from more than a dozen callers inside Stewart over the past two weeks reflect uncertainty about the handling of sick people at Stewart and growing alarm over the impossibility of social distancing inside the walls of Stewart.

22. One caller reported a sore throat, dizziness, and diarrhea. He said that people who are seen coughing and going to a medical appointment are simply returned to the general population instead of isolated. One caller reported feeling numbness in his left arm and pressure on his chest. Another noted that detainees with symptoms are afraid to report them because of fears of being placed in segregation, where a number of detainees have died by suicide. Another reported that people who are

sick might not ask for a medical appointment because they do not believe they will be treated with appropriate measures. Another reported that ICE had attempted to deport him on March 16, but his country was not accepting deportees and so he was returned to Stewart.

23. Another caller said he asked facility staff or ICE about social distancing, only to be told that does not apply to them because they are in detention. Another, a man with hepatitis, said he had bought himself soap and that it is impossible to stay separated from others inside the detention center.

24. SIFI has also received letters from a group of men inside Stewart requesting our help to get out in light of concerns about COVID-19. In the letter, the men, who refer to themselves at Cubans Together for Liberty, stated that Stewart is not ready to confront an epidemic of this nature. They lament being confined against their will and asked us to do something as soon as possible to prevent something terrible from occurring inside Stewart.

25. Today, on April 2, 2020, I spent some time with a SIFI client who was released from Stewart yesterday. He told me about conditions inside Stewart. He was confined in a unit with nearly 70 people. His bunk bed was less than one meter from the others in the row. All of the occupants of the unit shared only three toilets. Their access to hygiene supplies was limited to the box of foam soap

installed on the bathroom wall. He and others received little information from ICE or private prison guards about COVID-19. The unit next to his was under quarantine. Guards would not enter or exit the unit, except to leave food for its occupants near the door. His concern mounted as he saw televised reports of COVID-19 infections among ICE officials and guards. Then he learned a Stewart guard was confirmed COVID-19 positive, and he feared for his own life. While he is grateful to be out, he expressed concern for his friends who are still confined inside Stewart against their will.

26. Since the COVID-19 outbreak was declared a pandemic, SIFI and partner organizations have submitted three letters to ICE and facility administrators requesting information about their response plans for this pandemic; yet to date, SIFI has received no response. These letters are attached as Exhibits A, B, and C to my declaration.

Pursuant to 28 U.S.C. 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed this 2nd day in April, 2020 in Decatur, Georgia.



Laura Rivera, Esq.